									Application or Docket Number							
PATENT APPLICATION FEE DETERMINATION RECOR																
Effective October 1, 2003										10-755-042						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER SMALL				
TOTAL CLAIMS			27		•	•		RATE	Π	FEE	1	RATE	FEE			
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		385.00	OR	BASIC FEE	770.00			
TOTAL CHARGEABLE CLAIMS			27 minus 20=		*	7		X\$ 9=		63	OR	X\$18=				
INDEPENDENT CLAIMS			minus 3 =		*	0		X43=			OR	X86=				
MULTIPLE DEPENDENT CLAIM PRESENT							+145=			OR	+290=					
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		448)	OR	TOTAL				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR	OTHER THAN R SMALL ENTITY					
AMENDMENTA		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER SUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	· 27	Minus		Ü	= 7		X\$ 9=		63	OR	X\$18=				
	Independent		Minus	***	<u>3 · </u>	=		X43=	1		OR	X86=				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+145=	T		OR	+290=				
									L E	_	OR	TOTAL ADDIT, FEE				
(Column 1) (Column 2) (Column 3)												_				
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	*	Minus	tinir		=		X\$ 9=	ı		OR	X\$18=				
	Independent	*	Minus	CNOCNT	CI AINA	-		X43=			OR	∙ X86=				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			OR	+290=				
								TOTA			OR	TOTAL ADDIT, FEE				
(Column 1) (Column 2) (Column 3)																
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- NONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	•	Minus	it it		= .		X\$ 9=			OR	X\$18=				
	Independent	*	Minus	***	,	=		X43=	1	·	OR	X86=	·			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1		OR	+290=				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." AD											ا.	TOTAL ADDIT, FEE				
***	if th "Highest Nu	mber Previously Pa mber Previously Pa aber Previously Pai	uid For* IN THI	S SPACE &	s less tha	n 3, enter "3."	-	ADDIT. FE			•					
	· · · · · · · · · · · · · · · · · · ·	•		•					•			•				

FORM PTO-875 (Rev. 10/03)

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